PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where ar in m

	ed below or directed oth							correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
53443	7590 08/19				Cert	ificate	of Mailing or Transn	nission	
WOODCOCK WASHBURN LLP CIRA CENTRE, 12TH FLOOR 2929 ARCH STREET					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
PHILADELPHI						(Depositor's name)			
								(Signature)	
								(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR		ATTO]	RNEY DOCKET NO.	CONFIRMATION NO.	
10/591,547	10/591,547 07/06/2007		Ruth Iaconi-Forrer			SYNT-0271		4838	
ITLE OF INVENTION	: CONTAINER AND CA	ARRIER SYSTEM FOR	SURGICAL AUXILL	ARY	MATER1AL				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0		\$1810	11/19/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS						
GEHMAN, BRYON P		3728	206-339000						
. Change of corresponde FR 1.363).	2. For printing on the patent front page, list (I) the names of up to 3 registered patent attorneys								
Change of corresp Address form PTO/SI	or agents OR, alternatively,								
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
		A TO BE PRINTED ON	•	• •	•				
PLEASE NOTE: Unl recordation as set fort	less an assignee is identi h in 37 CFR 3.11. Comp	ified below, no assignee oletion of this form is NO	data will appear on th T a substitute for filing	he pa g an a	tent. If an assigne ssignment.	e is id	entified below, the do	cument has been filed for	
(A) NAME OF ASSIG	GNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Synthes USA, LLC West Chester, Pennsylvania									
lease check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):		Individual 🎾 Co	porati	on or other private gro	up entity Government	
a. The following fee(s): XXXIssue Fee	are submitted:	41	o. Payment of Fee(s): (A check is enclos		se first reapply an	y prev	iously paid issue fee s	hown above)	
Publication Fee (N	Payment by credit card. Form PTO-2038 is attached.								
Advance Order - 4	# of Copies	XXKThe Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number <u>233050</u> (enclose an extra copy of this form).							
	tus (from status indicated s SMALL ENTITY statu		☐ b. Applicant is no	long	er claiming SMAL	L EN'I	TITY status. See 37 CF	R 1.27(g)(2).	
OTE: The Issue Fee and terest as shown by the i	d Publication Fee (if requeecords of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other the Office.	nan th	e applicant; a regis	tered a	attorney or agent; or the	e assignee or other party in	
· ·	/Jeremy M. Du				Date Nov.	18,	2010		
Typed or printed nameJeremy M. Dukmen			Registration No64,884						
n application. Confiden abmitting the completed his form and/or suggesti	tiality is governed by 35 application form to the tons for reducing this but irginia 22313-1450. DC	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the	1.14. This collection in depending upon the interest of the Chief Information O	s esti indivi ifficei	mated to take 12 m dual case. Any cor r, U.S. Patent and T	ninutes nment Fraden	to complete, including s on the amount of tim ark Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and the you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450,	

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.